

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) DMFI PAC		FEC IDENTIFICATION NUMBER ▼ C C00710848
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Sage Media Planning & Placement, Inc. Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 30 / 2021
Mailing Address 1322 G St SE		Amount 250733.43
City Washington	State DC	Zip Code 20003-3021
Purpose of Expenditure TV Advertising Buy - Estimated Cost	Category/ Type 004	Transaction ID : VVBANAQS0P0 Date of Disbursement or Obligation MM / DD / YYYY 06 / 29 / 2021
Name of Federal Candidate BROWN, M SHONTEL, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 11 State: OH
Calendar Year-To-Date Per Election for Office Sought 278246.23		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special Primary

Full Name of Payee Sena Kozar Strategies Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 30 / 2021
Mailing Address 3723 Jenifer St NW		Amount 14250.80
City Washington	State DC	Zip Code 20015-1805
Purpose of Expenditure TV Advertising Production - Estimated Cost	Category/ Type 004	Transaction ID : VVBANAQS277 Date of Disbursement or Obligation MM / DD / YYYY 06 / 30 / 2021
Name of Federal Candidate BROWN, M SHONTEL, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 11 State: OH
Calendar Year-To-Date Per Election for Office Sought 278246.23		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ▶ Special Primary

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	264984.23
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mellman, Mark, , ,

[Electronically Filed]

Date

MM / DD / YYYY
07 / 02 / 2021

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 3
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NAME OF COMMITTEE (In Full) DMFI PAC	FEC IDENTIFICATION NUMBER ▼ C C00710848
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Trilogy Interactive, LLC Non-Contribution Account		Date of Public Distribution/Dissemination 06 / 30 / 2021	
Mailing Address PO Box 4177		Amount 7687.00	
City Mountain View	State CA	Zip Code 94040-0177	Transaction ID : VVBANAQS463
Purpose of Expenditure Digital Advertising Buy & Production - Estimated Cost		Category/ Type 004	Date of Disbursement or Obligation 06 / 30 / 2021
Name of Federal Candidate BROWN, M SHONTEL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought 278246.23		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► <u>Special Primary</u>	

Full Name of Payee Trilogy Interactive, LLC Non-Contribution Account		Date of Public Distribution/Dissemination 07 / 01 / 2021	
Mailing Address PO Box 4177		Amount 5000.00	
City Mountain View	State CA	Zip Code 94040-0177	Transaction ID : VVBANAQS4C1
Purpose of Expenditure Digital Advertising Buy - Estimated Cost		Category/ Type 004	Date of Disbursement or Obligation 06 / 30 / 2021
Name of Federal Candidate BROWN, M SHONTEL, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought 278246.23		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2021 <input checked="" type="checkbox"/> Other (specify) ► <u>Special Primary</u>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	12687.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Mellman, Mark, , ,

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NAME OF COMMITTEE (In Full) DMFI PAC		FEC IDENTIFICATION NUMBER ▼ C C00710848
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Trilogy Interactive, LLC Non-Contribution Account		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 01 / 2021
Mailing Address PO Box 4177		Amount 575.00
City Mountain View	State CA	Zip Code 94040-0177
Purpose of Expenditure Digital Advertising Production - Estimated Cost	Category/Type 004	Transaction ID : VVBANAQS4D8 Date of Disbursement or Obligation MM / DD / YYYY 07 / 01 / 2021
Name of Federal Candidate BROWN, M SHONTEL, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 278246.23		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special Primary

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	575.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	278246.23

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*Mellman, Mark, , ,**[Electronically Filed]*

Date

MM / DD / YYYY
07 / 02 / 2021

Signature